Revision:	HCFA-PM- AUGUST 19	91-4 91	(BPD)		ATTACHMENT 2.6-A Page 9 OMB No.: 0938-					
	State:			INDIANA						
Citati	lon			Condition	or Requirement					
42 CFR 435 435.831 1902(m)(1)	(B),	c.	income f		determining countable iduals, the following					
(m)(4), ar 1902(r)(2) the Act			Th	The methods of the SSI program only.						
the ACT			de		or any more liberal methods plement 8a to ATTACHMENT					
			su me of <u>Su</u> li	pplement recip. thods than SSI section 1902() pplement 4 to	other than optional State lents, more restrictive, applied under the provisions f) of the Act, as specified in ATTACHMENT 2.6-A, and any more described in Supplement 8a to					
					l couples, the methods section 1611(e)(5) of the Act.					
				35.230, income	te supplement recipients under methods more liberal than SSI, Supplement 4 to ATTACHMENT					
			se	ction 1902(f)	te supplement recipients in States and SSI criteria States 1616 or 1634 agreements					
				SSI methods of	nly.					
				SSI methods at than SSI desc ATTACHMENT 2.	nd/or any more liberal methods ribed in <u>Supplement 8a to</u> 5-A.					
			X_	liberal than are described 2.6-A and more	restrictive and/ or more SSI. More restrictive methods in Supplement 4 to ATTACHMENT e liberal methods are described 8a to ATTACHMENT 2.6-A.					
Supersedes	91-22 3 37-4	Appro	val Date	1-16-92	Effective Date 1-1-92 HCFA ID: 7985E					



Revision:	HCFA-PM-91-4 AUGUST 1991	(BPD	ATTACHMENT 2.6-A Page 10 OMB No.: 0938-
	State:		INDIANA SAB NO 0330
Citat	ion		Condition or Requirement
		considerate same hof part	ermining relative responsibility, the agency lers only the income of spouses living in the lousehold as available to spouses and the income sents as available to children living with suntil the children become 21.
42 CFR 435 and 435.8 1902(m)(1)(m)(4), and 1902(r)(2) the Act	31)(B), nd	counta indivi with i level	ed individuals. In determining ble income of disabled duals, including individuals ncomes up to the Federal poverty described in section 1902(m) of the following methods are used:
			The methods of the SSI program.
			SSI methods and/or any more liberal methods described in <u>Supplement 8a to ATTACHMENT</u> 2.6-A.
			For institutional couples: the methods specified under section 1611(e)(5) of the Act.
			For optional State supplement recipients under \$435.230: income methods more liberal than SSI, as specified in <u>Supplement 4 to ATTACHMENT 2.6-A</u> .
		<u>X</u>	For individuals other than optional State supplement recipients (except aged and disabled individuals described in section 1903(m)(1) of the Act): more restrictive methods than SSI, applied under the provisions of section 1902(f) of the Act, as specified in <u>Supplement 4 to ATTACHMENT 2.6-A</u> ; and any more liberal methods described in <u>Supplement 8a to ATTACHMENT 2.6-A</u> .

TN No. 91-22
Supersedes
TN No. 87-4

Approval Date 1-1-92
HCFA ID: 7985E



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	State:		INDIANA						
Citati	on		Condition o	r Requirement					
		se	ction 1902(f) S	e supplement recipients in tates and SSI criteria States 616 or 1634 agreements					
			SSI methods only.						
			SSI methods an than SSI descr ATTACHMENT 2.6	d/or any more liberal methods ibed in <u>Supplement 8a to</u> -A.					
		X	than SSI, exceindividuals de of the Act. Mescribed in Secribed in	estrictive and/or more liberal pt for aged and disabled scribed in section 1902(m)(1) fore restrictive methods are supplement 4 to ATTACHMENT liberal methods are specified 8a to ATTACHMENT 2.6-A.					
		agency c the same income c	considers only to household as a of parents as av	financial responsibility, the he income of spouses living in vailable to spouses and the ailable to children living children become 21.					
Supersedes	91-22 37-4 App	proval Date	1-16-92	Effective Date 1-1-92					



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ATTACHMENT 2.6-A Page 11a

STAT	E PLAN UNDER	TITLE	XIX OF THE SOCIAL SECURITY ACT
State:		IN	DIANA
	ELIGIBILITY	CONDI	TIONS AND REQUIREMENTS
Citation(s)	Co	onditio	on or Requirement
1902(1)(3)(E) and 1902(r)(2) of the Act	е.	child child sect	
		<u> </u>	determining countable income: The methods of the State's approved AFDC plan.
			The methods of the approved title IV-E plan.
			The methods of the approved AFDC State plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.
			The methods of the approved title IV-E plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.

TN No.	92-03	····				
Supersede	s	Approval Date	4-24-92	Effective 1	Date	1-1-92
TN No.	91-22					

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:			INI	DIANA	<u> </u>			Ma-
	ELIGIBILITY	CONDIT	CIONS	AND	REQUIREMEN	NTS		
Citation(s)	Co	onditio	on or	Requ	irement			110
		(2)	the incomi	income holome of me of mg wi	mining relationship relationshi	e agency ses livi: able to as avail:	consideng in the spouses able to	ne same and the children
1902(e)(6) of the Act		(3)	elig: 1902 rega: fami: 60-da any:	ible (a)(i rd to ly o ay po remai	cy continue under the 10) of the o any chang f which she eriod aftering days falls.	provisi Act as ges in i e is a m r her pr	ons of a cligible ncome of ember, egnancy	sections e, without f the for the ends and
1905(p)(1), 1902(m)(4), and 1902(r)(2) of the Act	f.	dete Media 1902	rmini care	ng cobene 0)(E	icare bene ountable in ficiaries () (i) of the sed:	ncome fo	r quali under s	ection
		X_	The	meth	ods of the	SSI pro	gram on	ly.
			than	SSI	ods and/or described			
			For spec Act.	ifie	itutional d under se	couples,	the me	thods) of the

TN No. 92-03						
Supersedes	Approval	Date	4-24-92	Effective	Date	1-1-92
TN NO 01-00	PP					

TN No. 91-22

Revision: HCFA-PM-93-2 (MB)

MARCH 1993



State:	INDIANA

Citation

Condition or Requirement

If an individual receives a title II benefit, any amounts attributable to the most recent increase in the monthly insurance benefit as a result of a title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the date of publication.

1905(s) of the Act

g. (1) Qualified disabled and working individuals.

In determining countable income for qualified disabled and working individuals covered under 1902(a)(10)(E)(ii) of the Act, the methods of the SSI program are used.

1905(p) of the Act

(2) Specified low-income Medicare beneficiaries.

In determining countable income for specified low-income Medicare beneficiaries covered under 1902(a)(10)(E)(iii) of the Act, the same method as in f. is used.

TN No. 93-007
Supersedes Approval Date 430-99 Effective Date 1-1-93
TN No. 92-03

Revision: HCFA-PM-91-8 (MB) ATTACHMENT 2.6-A Page 12b October 1991 OMB No.: INDIANA State/Territory: __ Citation Condition or Requirement 1902(u) (h) COBRA Continuation Beneficiaries of the Act In determining countable income for COBRA continuation beneficiaries, the following disregards are applied: The disregards of the SSI program; The agency uses methodologies for treatment of income more restrictive than the SSI program. These more restrictive methodologies are

1612(b)(4)(B)(ii).

TN No. 91-22
Supersedes Approval Date 1-16-92

Effective Date 1-1-92

TN No. New HCF

HCFA ID: 7985E

described in Supplement 4 to Attachment 2.6-A.

at 1902(u)(4), costs incurred from medical care or for any other type of remedial care shall not be taken into account in determining income, except as provided in section

NOTE: For COBRA continuation beneficiaries specified



Revision: HCFA-PM-91-4

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(BPD)

ATTACHMENT 2.6-A

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OMB No.: 0938-

State: _____INDIANA

Citation

Condition or Requirement

1902(k) of the Act

2. Medicaid Qualifying Trusts

In the case of a Medicaid qualifying trust described in section 1902(k)(2) of the Act, the amount from the trust that is deemed available to the individual who established the trust (or whose spouse established the trust) is the maximum amount that the trustee(s) is permitted under the trust to distribute to the individual. This amount is deemed available to the individual, whether or not the distribution is actually made. This provision does not apply to any trust or initial trust decree established before April 7, 1986, solely for the benefit of a mentally retarded individual who resides in an intermediate care facility for the mentally retarded.

_/

The agency does not count the funds in a trust as described above in any instance where the State determines that it would work an undue hardship. Supplement 10 of ATTACHMENT 2.6-A specifies what constitutes an undue hardship.

1902(a)(10) of the Act

Medically needy income levels (MNILs) are based on family size.

<u>Supplement 1 to ATTACHMENT 2.6-A</u> specifies the MNILs for all covered medically needy groups. If the agency chooses more restrictive levels under section 1902(f) of the Act, Supplement 1 so indicates.

TN No. 91-22
Supersedes
TN No. New

Approval Date 1-16-92

Effective Date 1-1-92

HCFA ID: 7985E



ATTACHMENT 2.6-A Revision: HCFA-PM-91-4 (BPD) Page 14 AUGUST 1991 OMB No.: 0938-INDIANA State: _ Citation Condition or Requirement 42 CFR 435.732, 4. Handling of Excess Income - Spend-down for the 435.831 Medically Needy in All States and the Categorically Needy in 1902(f) States Only a. Medically Needy (1)Income in excess of the MNIL is considered as available for payment of medical care and services. The Medicaid agency measures available income for periods of either month(s) (not to exceed 6 months) to determine the amount of excess countable income applicable to the cost of medical care and services. If countable income exceeds the MNIL (2) standard, the agency deducts the following incurred expenses in the following order: Health insurance premiums, deductibles and (a) coinsurance charges. Expenses for necessary medical and remedial (b) care not included in the plan. Expenses for necessary medical and remedial (C) care included in the plan. Reasonable limits on amounts of expenses deducted from income under a.(2)(a) and (b) above are listed below. Incurred expenses that are subject to 1902(a)(17) of the Act payment by a third party are not deducted unless the expenses are subject to payment

by a third party that is a publicly funded program (other than Medicaid) of a State or local government.

	Approval	Date	1-16-92	Effective Date	1-1-4.
Th no. $Ne\omega$					

HCFA ID: 7985E



Revision:	0cto	FA-PM-91-8 ber 1991 ate/Territory	(MB)	INDIANA	ATTACHMENT Page 14a OMB No.	2.6-A
Citati	ion			Condition or R	equirement	
1903(f)(2) the Act) of		If cou	edy (Continued) intable income exceird, the agency dedits made to the Standard.	ucts spenddown	

TN No. 91-22 Supersedes TN No. NEW Approval Date 1-16-92

Effective Date 1-1-92

HCFA ID: 7985E/